PTO/SB/17 (12-04)

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ADEMA: Effective on 12/08/2004.	Complete if Known		
FEE TRANSMITTAL For FY 2005	Application Number	10/625,401	
	Filing Date	7/23/2003	
	First Named Inventor	Charles Edwin Taylor	
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	John Teresinski	
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	285 2	

Applicant claims small entity	status. See 37 CI	FR 1.27	Art Unit	28	35 2		
TOTAL AMOUNT OF PAYMENT	(\$) 180.00		Attorney Doc		SHPR-01361USB		
METHOD OF PAYMENT (che	METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit A						<u>iesler Meyer</u>	r LLP_
For the above-identified de	posit account, the	Director is he	reby authorized	l to: (check all	that apply)		
Charge fee(s) indica	ted below		Cha	arge fee(s) ind	icated below, e	except for the fill	ing fee
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity							
Application Type Fee		Fee (\$		Fee (\$)	Fee (\$)	<u>Fees Pai</u>	<u>a (\$)</u>
Utility 300		500	250	200	100		
Design 200		100	50	130	65		
Plant 200	0 100	300	150	160	80		
Reissue 300	0 150	500	250	600	300	***************************************	
Provisional 200	0 100	0	0	0	0		
2. EXCESS CLAIM FEES							
Fee Description Each claim over 20 or, for Reis	ssues each clain	n over 20 an	d more than i	n the original	natent	<u>Fee (\$)</u> 50	Fee (\$) 25
Each independent claim over 3							100
Multiple dependent claims	01, 101 110100	, • • • • • • • • • • • • • • • • • • •			· une original j	360	180
Total Claims Extra	Claims Fee	(\$) <u>Fee</u>	Paid (\$)	<u>Multiple</u>	Dependent Cla	alms	
- 20 or HP =	x	=		<u>Fee (\$</u>	<u>Fee</u>	Paid (\$)	
HP = highest number of total claims p Indep. Claims Extra	claims Fee		Paid (\$)				
- 3 or HP =	x						
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
Total Sheets							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
Other: Information Disclosure Statement 180.00						30.00	

SUBMITTED BY	- 20		
Signature	Tillon N. Ku	Registration No. (Attorney/Agent) 41.132	Telephone 415.362.3800
Name (Print/Type)	Jeffrey R. Kurin		Date 3 31/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: SHPR-01361USP